

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR ORM LIMITED OFFERING EXEMPTI

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OMB APPROVAL
OMB Number: 3235-0076
Expires:
Estimated average burden
hours per response.....16.00

SEC USE ONLY								
Prefix		Serial						
DATE RECEIVED								

UNIFOR	M LIMITED OFFERING EXEM	PTION
	t and name has changed, and indicate change.)	
Series B-8 Convertible Preferred Stock Filing Under (Check box(es) that apply): Rule	504 Rule 505 Rule 506 Section 4(6)) ULOE
Type of Filing: New Filing Amendment		
	A. BASIC IDENTIFICATION DATA	
1. Enter the information requested about the issuer		
Name of Issuer (check if this is an amendment as Ball Semiconductor Incorporated	nd name has changed, and indicate change.)	05068621
Address of Executive Offices	(Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
415 Century Parkway, Allen, Texas 75013		972-359-2423
Address of Principal Business Operations (if different from Executive Offices)	(Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
Brief Description of Business	:	0
Reserach, development, and manufacturing of	microelectronic components and lithography	equipment. V
Type of Business Organization	ostronskin olasodu formod	
	partnership, already formed other (please specify): OCT 26 2005
Actual or Estimated Date of Incorporation or Organiza Jurisdiction of Incorporation or Organization: (Enter t CN fe		
GENERAL INSTRUCTIONS		Tarred Names
Federal: Who Must File: All issuers making an offering of securi 77d(6).	ties in reliance on an exemption under Regulation D	or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C.
When To File: A notice must be filed no later than 15 and Exchange Commission (SEC) on the earlier of the which it is due, on the date it was mailed by United St	date it is received by the SEC at the address given b	
Where To File: U.S. Securities and Exchange Commis	ssion, 450 Fifth Street, N.W., Washington, D.C. 20	0549.
Copies Required: Five (5) copies of this notice must be photocopies of the manually signed copy or bear typed	e filed with the SEC, one of which must be manual or printed signatures.	ly signed. Any copies not manually signed must be
Information Required: A new filing must contain all in thereto, the information requested in Part C, and any ma not be filed with the SEC.		
Filing Fee: There is no federal filing fee.	İ	
State: This notice shall be used to indicate reliance on the U ULOE and that have adopted this form. Issuers relyi are to be, or have been made. If a state requires the accompany this form. This notice shall be filed in the this notice and must be completed.	ng on ULOE must file a separate notice with the spayment of a fee as a precondition to the claim for	Securities Administrator in each state where sales or the exemption, a fee in the proper amount shall
	ATTENTION-	
Failure to file notice in the appropriate stat appropriate federal notice will not result in	es will not result in a loss of the federal e	

filing of a federal notice.

		A. BASIC ID	ENTIFICATION DATA			
2. Enter the information	requested for the fo	ollowing:				
• Each promoter of	of the issuer, if the is	suer has been organized v	vithin the past five years;			
• Each beneficial	owner having the pov	ver to vote or dispose, or di	rect the vote or disposition	of, 10% or more o	facla	ss of equity securities of the issuer
• Each executive	officer and director of	of corporate issuers and of	corporate general and mai	naging partners of	partn	ership issuers; and
 Each general an 	d managing partner	of partnership issuers.				
Check Box(es) that Apply	Promoter	■ Beneficial Owner	Z Executive Officer	✓ Director		General and/or Managing Partner
Full Name (Last name firs Ishikawa, Akira (Estate	,	!			·	
Business or Residence Ad Ball Semiconductor Inc	,	Street, City, State, Zip C entury Parkway, Allen,				·
Check Box(es) that Apply	Promoter	✓ Beneficial Owner	Executive Officer	✓ Director		General and/or Managing Partner
Full Name (Last name firs Nakano, Hideshi	t, if individual)	1				
Business or Residence Add Ball Semiconductor Inc	•		·			1. A 10 (VI A 1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1
Check Box(es) that Apply	Promoter	Beneficial Owner	Executive Officer	Director		General and/or Managing Partner
Full Name (Last name firs Mills, Ralph	t, if individual)					
Business or Residence Ad	dress (Number and	Street, City, State, Zip C	ode)			
Ball Semiconductor Inc	corporated, 415 C	entury Parkway, Allen,	Texas 75013			
Check Box(es) that Apply	Promoter	Beneficial Owner	Executive Officer	Director		General and/or Managing Partner
Full Name (Last name firs	t, if individual)					A COLUMN AND A COLUMN ASSESSMENT
Takeda, Nobuo		!				
Business or Residence Ade		Street, City, State, Zip Co				
Ball Semiconductor Lin	mited, 4-1-7 Minar	ni Nagareyama, Nagai	reyama-shi, Chiba, Jap	an 270-0163		
Check Box(es) that Apply	Promoter	Beneficial Owner	Executive Officer	☐ Director		General and/or Managing Partner
Full Name (Last name firs Mei, Wenhui (Bill)	t, if individual)	:				
Business or Residence Add	•	· · · · · · · · · · · · · · · · · · ·				
Ball Semiconductor Inc	corporated, 415 Co	entury Parkway, Allen,	Texas 75013			
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	□ Director		General and/or Managing Partner
Full Name (Last name first Itoh, Takeshi	i, if individual)	:				
Business or Residence Add MHT America Holding			ode) ower, San Jose, Califor	nia 95954		
Check Box(es) that Apply:	Promoter	☑ Beneficial Owner	Executive Officer	✓ Director		General and/or Managing Partner
Full Name (Last name first Ishikawa, Akihito	t, if individual)					
Business or Residence Add Ball Semiconductor Inc		Street, City, State, Zip Co entury Parkway, Allen,				

(Use blank sheet, or copy and use additional copies of this sheet, as necessary)

A. BASIC IDENTIFICATION DATA Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer. Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers Check Box(es) that Apply: Promoter ■ Beneficial Owner Executive Officer General and/or Managing Partner Full Name (Last name first, if individual) MHT America Holdings, Inc. Business or Residence Address (Number and Street, City, State, Zip Code) 2001 Gateway Place, 201 East Tower, San Jose, California 95954 Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer General and/or Managing Partner Full Name (Last name first, if individual) **Baird Limited** Business or Residence Address (Number and Street, City, State, Zip Code) Ministry of Finance Building, Bandar Seri Bagawan 2009, Brunei, Darussalam Check Box(es) that Apply: Beneficial Owner Promoter Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) AAKI Holdings, J. V. Business or Residence Address (Number and Street, City, State, Zip Code) 846 FM 2453 Royse City, Texas 75189 Check Box(es) that Apply: ✓ Beneficial Owner Executive Officer Promoter General and/or Managing Partner Full Name (Last name first, if individual) Disco Corporation Business or Residence Address (Number and Street, City, State, Zip Code) 14-3 Higashi Kojiya 2-chome, Ota-ku, Tokyo 114-8650 Japan Check Box(es) that Apply: ☐ Promoter Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Fuji Electronics Co., Ltd. Business or Residence Address (Number and Street, City, State, Zip Code) Ochanomizu Center Building, 3-2-13 Hongo, Bunkyo-ku, Tokyo, 113-8444 Japan Check Box(es) that Apply: Promoter ✓ Beneficial Owner Executive Officer General and/or Director Managing Partner Full Name (Last name first, if individual) Hiji High-Tech Co., Ltd. Business or Residence Address (Number and Street, City, State, Zip Code) 1357 Ohga, Hiji-machi, Hayami-gun, Oita-ken, 879-1504 Japan Check Box(es) that Apply: Beneficial Owner Executive Officer General and/or Promoter Director Managing Partner Full Name (Last name first, if individual) Hitachi Maxell Limited Business or Residence Address (Number and Street, City, State, Zip Code) Business Strategy Office2-18-2 lidabashi, Chiyoda-ku, Tokyo 102-8521 Japan

	ar Transconnection		A. BASIC ID	ENTI	FICATION DATA	projection.			
2. Enter the information re		llowing:						·····	
 Each promoter of t 	he issuer, if the is	suer has b	een organized v	vithin	the past five years;				
 Each beneficial ow 	ner having the pow	er to vote	or dispose, or d	irect th	e vote or disposition	of, 10	% ог тоге с	of a clas	s of equity securities of the issuer
 Each executive off 	icer and director o	f corpora	te issuers and of	corpo	rate general and ma	naging	partners of	f partne	ership issuers; and
 Each general and n 	nanaging partner o	f partners	hip issuers.						
Check Box(es) that Apply	Promoter	☑ Be	neficial Owner		Executive Officer		Director		General and/or Managing Partner
Full Name (Last name first, i Kyocera Corporation	f individual)		:						
Business or Residence Addre 6 Takeda Tobadono-cho	•		ity, State, Zip C -8501 Japan	ode)					
Check Box(es) that Apply:	Promoter	Z Be	neficial Owner		Executive Officer		Director		General and/or Managing Partner
Full Name (Last name first, i	f individual)		1						
Business or Residence Addre 2479 East Bayshore Roa	·		ity, State, Zip C California 943						
Check Box(es) that Apply:	Promoter	Z Ве	neficial Owner		Executive Officer		Director		General and/or Managing Partner
Full Name (Last name first, i Dallas Medical and Tech		ent Grou	p į						
Business or Residence Addre	ss (Number and	Street, C	ty, State, Zip C	ode)					
PO Box 830426, Richards	son Texas 7508	3	•						
Check Box(es) that Apply:	Promoter	☑ Be	neficial Owner		Executive Officer		Director		General and/or Managing Partner
Full Name (Last name first, i	f individual)		i						
Dallas Medical and Techr	nology Investme	nt Group	ıİ, L.P.						
Business or Residence Addre 2801 Lemmon Avenue, [·		ty, State, Zip C	ode)					
Check Box(es) that Apply:	Promoter	∑ Ве	neficial Owner		Executive Officer		Director		General and/or Managing Partner
Full Name (Last name first, i OMRON Corporation	f individual)								
Business or Residence Addre 1-11-1 Osaki, Shinagawa	•		ty, State, Zip C apan	ode)					
Check Box(es) that Apply:	Promoter	∠ Be	neficial Owner		Executive Officer		Director		General and/or Managing Partner
Full Name (Last name first, it Yamatake Corporation	f individual)								
Business or Residence Addre 1-12-2, Kawana, Fujisaw	•		ty, State, Zip C 1 251-8522	ode)					
Check Box(es) that Apply:	Promoter	∠ Ве	neficial Owner		Executive Officer		Director		General and/or Managing Partner
Full Name (Last name first, it Ball Technology Investme	-		i						
Business or Residence Addre 7F, Kojimachi, Tsuruya H	•				hiyoda-ku, Tokyo	102-	8518 Japa	an	

			A. BASIC IDI	ENTI	FICATION DATA				
2. Enter the information re	quested for the fol	lowing	g: ,						
 Each promoter of t 	he issuer, if the iss	uer ha	ns been organized w	ithin 1	the past five years;				
 Each beneficial ow 	ner having the pow	er to v	ote or dispose, or dis	rect th	e vote or disposition	of, 10	% or more o	f a clas	s of equity securities of the issuer.
Each executive off	icer and director o	f corpo	orate issuers and of	corpo	rate general and mar	aging	partners of	partne	ership issuers; and
Each general and n	nanaging partner o	f partn	ership issuers.						
Check Box(es) that Apply:	Promoter	Ø	Beneficial Owner		Executive Officer		Director		General and/or Managing Partner
Full Name (Last name first, i Ball Technology No. 2 Inv									
Business or Residence Addre 7F, Kojimachi, Tsuruya H					Chiyoda-ku, Tokyo	102-	-8518 Japa	an	
Check Box(es) that Apply:	Promoter	Ø	Beneficial Owner		Executive Officer		Director		General and/or Managing Partner
Full Name (Last name first, i Kenneth W. Shaw	f individual)								
Business or Residence Addre JSC Realty, 5440 Harvest			City, State, Zip Co Dallas, Texas 75	-					
Check Box(es) that Apply:	Promoter	Ø	Beneficial Owner		Executive Officer		Director		General and/or Managing Partner
Full Name (Last name first, i USA Ando Corporation	f individual)	•							
Business or Residence Addre 3-12-8 Shibaura, Minato-k			City, State, Zip Co apan	de)		•			
Check Box(es) that Apply:	Promoter	Z	Beneficial Owner		Executive Officer		Director		General and/or Managing Partner
Full Name (Last name first, i Nichia Corporation	f individual)		i			-			
Business or Residence Addre 491 Oka, Kiaminaka-cho	•		, City, State, Zip Co a-ken, 774-8601	- 1	n				
Check Box(es) that Apply:	Promoter	√	Beneficial Owner		Executive Officer		Director		General and/or Managing Partner
Full Name (Last name first, in Mizuho Securitites Co., L			; ;						
Business or Residence Addre 1-5-1 Otemachi, Chiyoda			City, State, Zip Co Japan	de)					
Check Box(es) that Apply:	Promoter	Z	Beneficial Owner		Executive Officer		Director		General and/or Managing Partner
Full Name (Last name first, in AquaRIMCO No.16 Investigation		nip							
Business or Residence Addre Kawate Building 7F, 1-5-					003 Japan				
Check Box(es) that Apply:	Promoter	V	Beneficial Owner		Executive Officer		Director		General and/or Managing Partner
Full Name (Last name first, in Fitzgibbons, John M	f individual)		!						
Business or Residence Addrese 6207 Woodland, Dallas, 1		Street,	City, State, Zip Co	de)					

\$6.49 3				1.4 %	В.	NFORMAT	ION ABOU	T OFFERI	NG				
1	Uac tha	icquer cold	l or does th	na icenar ii	atend to s	ell, to non-a	coredited i	nvectors ir	this offer	ina?		Yes	No
1.	rias inc	155001 5010	i, or does tr			n Appendix				•			X
2.	What is	the minim	um investn			epted from a						_{\$} 25.	00
					1							Yes	No
3.						gle unit?							×
4.	commis If a pers or state:	sion or simi son to be lis s, list the na	ilar remune ted is an ass ime of the b	ration for s sociated pe roker or de	solicitation rson or ag caler. If m	who has been of purchase ent of a broke ore than five ion for that	ers in conne er or deale e (5) persor	ection with r registered ns to be list	sales of sec d with the S ed are asso	curities in t SEC and/or	he offering. with a state		
Ful	l Name (Last name:	first, if indi	vidual)								-	
Bus	siness or	Residence	Address (N	umber and	d Street, C	City, State, Z	Lip Code)				<u> </u>		
Nai	ne of As	sociated Br	oker or De	aler									
Sta	tes in Wh	ich Person	Listed Has	Solicited	or Intend	s to Solicit	Purchasers						
	(Check	"All States	" or check	individual	States)				•••••			All All	l States
	AL	AK	$\overline{A}\overline{Z}$	AR	CA	CO	CT	DE	DC	FL	GA	HI	ID
	IL	IN	IA	KS	KY	LA	ME	MD	MA	MI	MN	MS	MO
	MT RI	NE SC	NV SD	NH TN	TX	NM UT	NY VT	NC VA	ND WA	OH WV	OK WI	OR WY	PA PR
Ful	l Name (Last name	first, if indi	vidual)	1								
Bus	siness or	Residence	Address (N	Number an	d Street,	City, State,	Zip Code)						
Nar	ne of Ass	sociated Br	oker or Dea	aler			442.00						
Sta	tes in Wh	nich Person	Listed Has	Solicited	or Intend	s to Solicit	Purchasers						
	(Check	"All States	" or check	individual	States)	•••••	***************************************	,				☐ All	l States
	AL	AK	AZ	AR	CA	CO	\overline{CT}	DE	DC	FL	GA	HI	ID
	IL	IN	IA	KS	KY	LA	ME	MD	MA	MI	MN	MS	MO
	MT RI	NE SC	NV SD	NH TN	NJ TX	NM UT	NY VT	NC VA	ND WA	OH WV	OK WI	OR WY	PA PR
Enl			first, if indi										
rui	i Name (Last name	mst, it mu	viduai)									
Bus	siness or	Residence	Address (N	Number an	d Street,	City, State,	Zip Code)				•		
Nar	ne of Ass	sociated Br	oker or Dea	aler									
Sta	tes in Wh	ich Person	Listed Has	Solicited	or Intend	s to Solicit	Purchasers					-	
	(Check	"All States	" or check	individual	States)				•••••••			☐ All	l States
	AL	AK	AZ	AR	CA	CO	CT	DE	DC	FL	GA	HI	ID
	IL MT	IN NE	IA NV	KS NH	KY NJ	LA NM	ME NY	MD NC	MA ND	MI OH	MN OK	MS OR	MO PA
	RI	SC	SD	TN	TX	UT	VT	VA	WA	WV	WI	WY	PR

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

	sold. Enter "0" if the answer is "no this box and indicate in the columnal ready exchanged.	nns below the amounts of the securities offered for e	xchange and	
	Type of Security		Aggregate Offering Price	Amount Already Sold
	Debt		_{\$} 0.00	§ 0.00
				s 135,000.00
		Common Preferred		0.00
		g warrants)		\$
				\$_0.00
				\$ 0.00
	Total		<u>\$</u> 265,700.00	\$_135,000.00
	Answer also in App	pendix, Column 3, if filing under ULOE.		
2.	offering and the aggregate dollar am	non-accredited investors who have purchased securiounts of their purchases. For offerings under Rule 5 purchased securities and the aggregate dollar amo 60" if answer is "none" or "zero."	04, indicate	Aggregate Dollar Amount
			Investors	of Purchases
	Accredited Investors		3	\$ 135,000.00
	Non-accredited Investors		<u>0</u>	\$_0.00
	Total (for filings under	Rule 504 only)		\$
	Answer also in	Appendix, Column 4, if filing under ULOE.		
3.	sold by the issuer, to date, in offerin	Rule 504 or 505, enter the information requested for a gs of the types indicated, in the twelve (12) months $_{\rm ng}$. Classify securities by type listed in Part C — C	prior to the	
	Type of Offering		Type of Security	Dollar Amount Sold
	Rule 505			\$
	Regulation A	•		\$
	Rule 504			\$
	Total	······		\$ 0.00
4	securities in this offering. Exclude The information may be given as sul	enses in connection with the issuance and distrib amounts relating solely to organization expenses of bject to future contingencies. If the amount of an ex check the box to the left of the estimate.	the insurer.	
	Transfer Agent's Fees	:		\$
	Printing and Engraving Costs			\$
	Legal Fees			\$_5,000.00
	Accounting Fees			\$
	Engineering Fees			\$
	•	nders' fees separately)	_	\$
				\$

	G. OFFERING PRICE, NUM	IBER OF INVESTORS, EXPENSES AND USE O	OF PROCEEDS	
	b. Enter the difference between the aggregate offer and total expenses furnished in response to Part C proceeds to the issuer."	- Question 4.a. This difference is the "adjusted g	ross	260,700.00
5.	Indicate below the amount of the adjusted gross preach of the purposes shown. If the amount for a check the box to the left of the estimate. The total of proceeds to the issuer set forth in response to Par	iny purpose is not known, furnish an estimate of the payments listed must equal the adjusted gi	and	
	: :		Payments to Officers, Directors, & Affiliates	Payments to Others
	Salaries and fees		\$	\$
	Purchase of real estate		🔲 \$	\$
	Purchase, rental or leasing and installation of ma			
	and equipment	cilities	[] \$	□ \$ 130,700.00
	Acquisition of other businesses (including the va		[] \$	
	offering that may be used in exchange for the assissuer pursuant to a merger)	sets or securities of another	🗍 💲	
	Repayment of indebtedness			
	Working capital			
	Other (specify):	***************************************	\$	\$
				\$
	Column Totals		s <u>0.00</u>	\$ 260,700.00
	Total Payments Listed (column totals added)		🗸 \$ <u></u>	50,700.00
. 7		D. FEDERAL SIGNATURE	Million Market Control of the Control	graphy of the state of the stat
igı	issuer has duly caused this notice to be signed by the nature constitutes an undertaking by the issuer to furnished by the issuer to any non-accordance.	ernish to the U.S. Securities and Exchange Com	ımission, upon writte	
ssı	er (Print or Type)	Signature	Date	
За	Il Semiconductor Incorporated	1 CC Mills	October 7, 2005	
lar	ne of Signer (Print or Type)	Title of Signer (Print or Type)		
	ph R. Mills, Jr.	Senior V.P. & CFO		

ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

	E. STATE SIGNATURE	. ja %*	
1.	Is any party described in 17 CFR 230.262 presently subject to any of the disqualification provisions of such rule?	Yes	No K

See Appendix, Column 5, for state response.

- 2. The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed a notice on Form D (17 CFR 239.500) at such times as required by state law.
- 3. The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.
- 4. The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.

The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

Issuer (Print or Type)	Signature	Date
Ball Semiconductor Incorporated	Ramille	October 7, 2005
Name (Print or Type) Ralph R. Mills, Jr.	Title (Print or Type) Senior V.P. & CFO	

Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

APPENDIX : 2 3 1 4 Disqualification Type of security under State ULOE Intend to sell and aggregate (if yes, attach offering price to non-accredited Type of investor and explanation of investors in State offered in state amount purchased in State waiver granted) (Part B-Item 1) (Part C-Item 1) (Part C-Item 2) (Part E-Item 1) Number of Number of Accredited Non-Accredited State Yes No Investors **Investors** Yes No Amount Amount ΑL ΑK AZAR CA CO CT DE DC FL GA HI ID ΙL ΙN ΙA KS KY LA ME MD MA MI MN MS

APPENDIX 2 3 4 1 5 Disqualification Type of security under State ULOE and aggregate Intend to sell (if yes, attach to non-accredited offering price Type of investor and explanation of investors in State offered in state amount purchased in State waiver granted) (Part B-Item 1) (Part C-Item 1) (Part C-Item 2) (Part E-Item 1) Number of Number of Accredited Non-Accredited **Investors** State Yes No Amount **Investors** Amount Yes No MO MT NE NV NH NJ NMNY NC ND OH OK OR PA RI SCSD TNTX\$265,000 Equity 3 \$0.00 × \$135,000.0 X UT VTVA WA WV WI

	APPENDIX											
1	1 2 3 Type of security 4								5 Disqualification under State ULOE			
	to non-a investor	to sell accredited s in State -Item 1)	and aggregate offering price offered in state (Part C-Item 1)		(if yes, attach explanation of waiver granted) (Part E-Item 1)							
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No			
WY												
PR												